SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY		
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		B. Received by (Printed Name) C. Date of Delivery 2017 C. Date of Deliv		Date of Delivery    2-17-07    2   Yes
Article Addressed to:  Hobart Brothers Company  c/o Its President		If YES, enter delivery address below:		
600 W. Main Street Troy, OH 45373		3. Service Type  10 Certified Mail  Sequistered  Insured Mail	D Express Mail Return Receipt C.O.D.	for Merehandler
01er 10ley 54C		4. Restricted Delivery	? (Extra Fee)	☐ Yes
Article Number     (Transfer from service lab)	7003 3110	0004 0800	3323	
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